

Cal/OSHA 9

State of California

1. Date: _____

Department of Industrial Relations

2. Eng/IH: _____

Division of Occupational Safety and Health

3. Region/District/Unit: _____

REQUEST FOR NEW, OR CHANGE IN EXISTING, SAFETY ORDER

4. Industry:

5. Proposal for New Safety Order or Change in Existing Safety Order:

PART 1 NEW SAFETY ORDER

6. Hazard Description (include process, condition, machinery, equipment or product involved):

7. Recommended New Safety Order Language (Use any guidelines, standards or codes of work practices):

PART 2
CHANGE IN EXISTING SAFETY ORDER

8. Reason(s) for request (employer's appeal granted, advice of Legal Unit Staff, Safety Order needs clarification or other):

9. Section/Subsection reference to existing Title 8 Safety Order:

10. Suggested change(s) to existing Safety Order (exact new wording):

11. _____
Signature of Requestor

12. _____
Signature of Supervisor